

3621

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/639,014	
	Filing Date	08/15/2000	
	First Named Inventor	Gallagher	
	Art Unit	3621	
	Examiner Name	Winter, J.	
Total Number of Pages in This Submission	2	Attorney Docket Number	017887-005900US

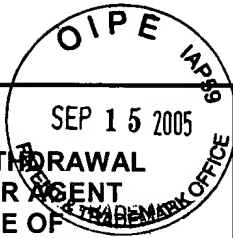
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP Phillip H. Albert Reg. No. 35,819
Signature	
Date	September 7, 2005

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Signature		Date	September 13, 2005

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PTO/SB/83 (09-03)

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	09/639,014
Filing Date	08/15/2000
First Named Inventor	Gallagher
Art Unit	3621
Examiner Name	Winter, J.
Attorney Docket Number	017887-005900US

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record
- ☐ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ all the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Client requests to transfer matter

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Brinks Hofer Gilson & Lione				
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Name	Philip H. Albert				
Signature				Registration No.	35,819
Date	September 7, 2005				

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.